## **BASSET HOUND CLUB OF AMERICA** VERSATILITY CERTIFICATE PROGRAM

APPLICATION FOR :	VC	VCX	VCM	GVC	GVCX	
REGISTERED NAME						
DATE OF BIRTH						
AKC #			SEX			
NAME OF OWNER(S)						
ADDRESS						
CITY, STATE, ZIP						
For VC, VCX or VCM fill in title or "Partial', point value and date						
DISCIPLINE		DATE				DATE EARNED
A. CONFORMATION	VALUE	EARNED	G	VC		
			*(	СН		
			F	С		
B. FIELD TRIAL/HUNT TEST			С	Т		
			N	IACH or PACH		
			0	TCH or POC		
C. TRACKING			R	ACH		
			s	WD or SWME		
D. AGILITY			G	VCX		
				GCH		
			G	FC		
E. OBEDIENCE/RALLY			С	Т		
			N	IACH or PACH		
			0	TCH or POC		
F. THERAPY DOG			R	ACH		
			s	WD or SWME		
G. SCENT WORK			*F	Required		
				I have attach	ied proper docu	mentation
TOTAL POINTS	and all owners are BHCA members.					

Owner's Signature and date:

KEEP A COPY OF THIS FORM FOR YOUR RECORDS v Oct 2020